UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB Number: Expires:

Estimated average burden hours per response.

OCT 16 200

RECEIVED

SEC USE ONLY

Serial

OMB APPROVAL

NOTICE OF SALE OF SECURITIES Prefix PURSUANT TO REGULATION D SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amenda Perella Weinberg Partners Oasis Offshore Fund		nanged, and indicate cl	hange.)		
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	Rule 506	Section 4	6) NULOE
_, , ,,	Amendment				(0)
<u> </u>		C IDENTIFICATION D	ATA	 .	
1. Enter the information requested about the iss	suer				
Name of Issuer (check if this is an amen Perella Weinberg Partners Oasis Offshore Fund		changed, and indicate	change.)		
Address of Executive Offices	(Number and Street	, City, State, Zip Code))	Telephone Number (II	ncluding Area Code)
c/o Perella Weinberg Partners Capital Management LP	767 Fifth Avenue, N	ew York, NY 10153		(212) 287-3200	
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street	, City, State, Zip Code)		Telephone Number (In	ncluding Area Code)
			70F99		
Brief Description of Business	- !- .				
Private company that invests in a limited partner	r interest of an affiliate	ed entity.	T 2 3 200	7 P	
				<i>' </i>	
			-IOMSUM		
Type of Business Organization	District	F	MANCIAL		
⊠ corporation	☐ limited partnersh	•		other (please spec	city):
☐ business trust	☐ limited partnersh	ip, to be formed			
		Month	Year		
Actual or Estimated Date of Incorporation or Org	ganization:	0 2	7		☐ Estimated
Jurisdiction of Incorporation or Organization:	•	i. Postal Service abbre for other foreign jurisdi		te: F N	

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (05-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDENTIF	ICATION DATA		
2. Enter the information requ	ested for the following:	· · · · · · · · · · · · · · · · · · ·			
•		en organized within the past five	•		
	- ·	or dispose, or direct the vote or	·	, -	es of the issuer;
	·	ssuers and of corporate genera	I and managing partners of pa	artnership issuers; and	
Each general and m	anaging partner of partnersh				
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner-
Full Name (Last name first,	if individual)				
Perella Weinberg Partners (Capital Management LP				
Business or Residence Add	ress (Number and Street	, City, State, Zip Code)			
767 Fifth Avenue, New York	, NY 10153				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Check Box(es) that Apply:					
Full Name (Last name first,	if individual)				
Kourakos, William			 	-	
Business or Residence Add	ress (Number and Street	, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Parsley, Rod					
Business or Residence Add	ress (Number and Street	, City, State, Zip Code)			<u> </u>
c/o Perella Weinberg Partne	rs Capital Management I	LP, 767 Fifth Avenue, New '	York, NY 10153	•	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				·····
Ruddick, Geoff					
Business or Residence Add	ress (Number and Street	, City, State, Zip Code)			
c/o International Manageme	nt Services Ltd., 4 th Floor	r, Harbour Centre, PO Box 6	61, KY1-1102, George Tov	wn, Grand Cayman, Ca	ayman Islands
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Bowring, Christopher					
Business or Residence Add	ress (Number and Street	, City, State, Zip Code)			
c/o International Manageme	nt Services Ltd., 4 th Floor	, Harbour Centre, PO Box 6	51, KY1-1102, George Tov	wn, Grand Cayman, Ca	ayman Islands
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
PWP Multi-Strat (Offshore) L	P.				
Business or Residence Add	ess (Number and Street,	, City, State, Zip Code)			_
767 Fifth Avenue, New York	, NY 10153				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		- .		
Citco Global Custody NV Re	f RMF				
Business or Residence Addr	ess (Number and Street,	City, State, Zip Code)	, ,		
Telestone 8 - Teleport, Nari	taweg 165, 143BW Amst	erdam, The Netherlands			
		-			

,		•		•	E	. INFORMA	TION ABOU	JT OFFERIN	IG				
												Yes	No
1.								⋈					
_								_					
2.	What is the minimum investment that will be accepted from any individual?									\$100,000.0	0		
3.	Does th	ne offering	permit joint	ownership of	f a single un	it?						Yes ⊠	No
4.													
	name c	of the broke	er or dealer.	If more than	five (5) per	sons to be lis							
	may se	t forth the	information t	for that broke	er or dealer (only.							
Full	Name (l	_ast name	first, if indivi	dual)									
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
	Answer also in Appendix, Column 2, if filling under ULOE.												
Nam	ne of Ass	sociated Br	oker or Dea	ler				•					
Stat	es in Wh	nich Persor	Listed Has	Solicited or	Intends to S	olicit Purcha	sers						
(Check "/	All States"	or check ind	lividual State	s)				**!****			☐ All State	s
[A	L)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[]	L]	[IN]	[IA]		[KY]	[LA]	(ME)		[MA]				
[N	IT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(F	RIJ	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[AW]	[WV]	(WI)	[WY]	[PR]
State	es in Wh	nich Persor	Listed Has	Solicited or	Intends to S	olicit Purcha	sers			_			
									*******		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ All State	ıs
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	(DC)	(FL)	(GA)	(HI)	[ID]
		[N]		• •									
[M	1T]	[NE]	[NV]	[NH]	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]		[OR]	[PA]
(F	RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)
Full	Name (L	ast name	first, if indivi	dual)									
	`			,									
Busi	ness or	Residence	Address (N	umber and S	Street, City.	State. Zip Co	ode)						
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			- (a.a.) - (a.a.)	,,,,,						
Nam	e of Ass	sociated Br	oker or Dea	ler		· · ·				•			
1.00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01.07.01.000										
State	es in Wh	ich Person	l isted Hae	Solicited or	Intends to S	olicit Purcha							
												□ All State	s
, [A					•					(F) 1	[GA]		
-	L]		• •					• •				• •	• •
	, IT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[F	સ]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	(WA)	[WV]	[WI]	[WY]	(PR)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$122,277,413.00	\$122,277,413.00
	☐ Preferred		
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$122,277,413.00	\$122,277,413.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	26	\$122,277,413.00
	Non-accredited Investors	 -	\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	⊠	\$2,100.00
	Legal Fees	⊠	\$359,500.00
	Accounting Fees	⊠	\$3,600.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		· · · · · · · · · · · · · · · · · · ·
	Total	⊠	\$365,200.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

the	Question 1 and total expenses in response and adjusted gross proceeds to the issuer."	ate offering price given in response to Part C to Part C – Question 4.a. This difference is			\$12	1,912,213.00	
to fur list	be used for each of the purposes shown. nish an estimate and check the box to the i	If the amount for any purpose is not known, eft of the estimate. The total of the payments s to the issuer set forth in response to Part C					
				Payments to Officers, Directors & Affiliates		Payments To Others	
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	
Purchase, rental or leasing and installation of machinery and equipment				\$		\$	
Construction or leasing of plant buildings and facilities				\$		\$	
		g the value of securities involved in this r the assets or securities of another issuer		\$		\$	
	Repayment of indebtedness			\$		\$	
				\$		\$	
	•	invests in a limited partner interest of an		\$	Ø	\$121,912,213.00	
				\$ -		\$	
	Column Totals			\$	⊠	\$121,912,213.00	
	Total Payments Listed (column totals added)			\$121,912,213.00			
14.5		D. Gederal Signature	wanta" -				
nstitu	uer has duly caused this notice to be signed tes an undertaking by the issuer to furnish (by the undersigned duly authorized person. to the U.S. Securities and Exchange Commiss tor pursuant to paragraph (b)(2) of Rule 502.	lf this r	notice is filed under Rule	505, t	he following signati	
uer (l	Print or Type)	Signature		Date			
rella '	Weinberg Partners Oasis Offshore Fund	WC		October \$2007	<u>.</u>		
1.	f Signer (Print or Type)	Title of Signer (Print or Type)					
ime o	Kourakos	Authorized Signatory					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

